

MELATONIN (IN)SUFFICIENCY ASSESSMENT

Laboratory analysis of melatonin has several challenges, and, therefore, is not always reliable. Therefore, assessing one's client using the checklist below may provide a general, indirect guide to whether melatonin levels could be imbalanced. The list below gives general, proposed markers that could indicate reduced endogenous melatonin levels.

GENERAL HEALTH STATUS

- Abnormal fatigue (mitochondrial dysfunction)
- O Accelerated aging (e.g., hair greying, excessive skin fragility)
- O Advanced age (40+ years old)
- O Aspirin/ibuprofen use
- O Autoimmune disease
- O Blindness or impaired sight
- O Blood sugar imbalance
- O Changes in the menstrual cycle
- O Chronic inflammatory states (e.g., pain, redness, swelling)
- Chronic stress levels
- O Cortisol imbalance (high or low)
- O Difficulty with making seasonal transitions
- Gut dysbiosis
- O Known gene variants or deletions in glutathione
- Low bone mineral density
- O Low HCl production in stomach or use of medications to reduce HCl
- O Low vitamin D levels
- Medication side effects (decongestants, those with stimulating effects)
- Mood changes/shifts
- O Perimenopause or other fluxes in hormones
- O Recurring immune-related issues, like colds, flus, COVID, cancer, etc.
- O States of heightened oxidative stress (e.g., bouts of extensive exercise)

FOOD/DIET

- Alcohol consumption within 3 hours of bed
- O Increased intake of toxins such as heavy metals and endocrine disruptors
- O Intake of caffeinated beverages close to bedtime (or in the afternoon) for those who are sensitive to caffeine
- O Low intake of nutrient cofactors needed to synthesize melatonin (i.e., vitamin B5, vitamin B6, niacin, iron, zinc, magnesium, folate, vitamin C, methylcobalamin)
- O Low intake of protein, especially foods higher in L-tryptophan



WORK/ACTIVITIES

- O Aerobic activities within 3 hours of bedtime
- O Exercise in a well-lit gym at night
- O Travel at night in a well-lit airplane, train, or bus for extended periods
- O Work at night or doing shift work (e.g., casinos, hospitals, etc.)
- O Work in a daytime job that requires darkness (e.g., miners, X-ray technicians)
- Insufficient light <250 lux during the day

HOME ENVIRONMENT

- O Excessive exposure to artificial lighting (e.g., lamps, light fixtures) in surroundings between dusk and bedtime
- O Exposure to computer, iPad, or other electronic devices in the evening hours when it is dark
- Exposure to EMFs
- O Exposure to one or more appliances at home that cast light at night
- O Lack of exposure to morning light
- O Television-watching on a TV screen at night

SLEEP

- O Book-reading before going to sleep
- O Issues with acclimatization to different time zones with travel
- O LED alarm clock next to the bed while sleeping
- O Less than 7 hours of sleep per night
- O Lights on during sleeping, even just a night light
- O Living in a well-lit neighborhood where the light from outside (e.g., from street lamps, etc.) comes into the home at night
- Napping during late afternoon or early evening hours
- O Problems falling asleep or sleep maintenance insomnia
- O Sleep apnea
- O Use of a smartphone while in bed before going to sleep
- Varied sleep patterns during week compared to weekend (sleeping more or less)
- Warm body temperature at night

References:

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- 3. Greendale GA, Witt-Enderby P, Karlamangla AS, Munmun F, Crawford S, Huang M, Santoro N. Melatonin Patterns and Levels During the Human Menstrual Cycle and After Menopause. J Endocr Soc. 2020 Aug 27;4(11):bvaa115. doi: 10.1210/jendso/bvaa115. PMID: 33094207; PMCID: PMC756378
- 4. Meers JM, Nowakowski S. Sleep, premenstrual mood disorder, and women's health. Curr Opin Psychol. 2020 Aug;34:43-49. doi: 10.1016/j. copsyc.2019.09.003. Epub 2019 Sep 23. PMID: 31610482.